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Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				Complete if Known	
				Application Number	09/606,786
				Filing Date	June 28, 2000
				First Named Inventor	Robert Murphy
				Group Art Unit	2756
				Examiner Name	To Be Assigned
				Attorney Docket Number	34918.0100
Sheet	2	of	2		

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Examiner Signature	<i>April Chaffin</i>	Date Considered	9/17/03
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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